This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

STATEM	ENT OF ACCOUNT	FOR COPYRIG	HT OFFICE USE ONLY	by email to:
for Seconda	ary Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.gov
General instru	ems (Short Form) uctions are located of this workbook	8/31/22	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))	
	2022/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		Barcode Data Filing Period (optiona	I - see instructions)	
Accounting Period		_		
	Instructions:			
В			sidiary of another corporation, give the full o	corporate
Owner	List any other name or names under whi	ch the owner conducts the business of	the cable system.	
	If there were different owners during the single statement of account and royalty it		the last day of the accounting period should nting period.	d submit a
	Check here if this is the system's first filir	ng. If not, enter the system's ID numbe	r assigned by the Licensing Division.	5430
	LEGAL NAME OF OWNER/MAILIN	IG ADDRESS OF CABLE SYSTEM	Λ	
	Grande Communications Networks	s. LLC		
	BUSINESS NAME(S) OF OWNER O		Т)	
	MAILING ADDRESS OF OWNER OF	F CABLE SYSTEM		
	401 Carlson Circle (Number, street, rural route, apartment, or suite r	number)		
	San Marcos, TX 78666			
•	INSTRUCTIONS: In line 1, give any busi	ness or trade names used to ide	entify the business and operation of t	he system unless these
C	names already appear in space B. In line	2, give the mailing address of t	he system, if different from the addre	ss given in space B
System	1 Centrovision, Inc - Salado			
	MAILING ADDRESS OF CABLE SYSTEM	1:		
	401 Carlson Circle			
	San Marcos, TX 78666	number)		
	(City, town, state, zip code)			

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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
Name	Grande Communications Networks, LLC	543
D	Instructions: List each separate community served by the cable system. A "communit "a separate and distinct community or municipal entity (including unincorporated con discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis as the "first community." Please use it as the first community on all future filings.	nmunities within unincorporated areas and including single t will serve as a form of system identification hereafter kno
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho identified city.	ome parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First Community	Salado	TX
dd Rows as Necessary		

								FORM SA1-	
Name	LEGAL NAME OF OWNER OF C							SYS	
	Grande Communication	s Networks	s, LLC						543
-	SECONDARY TRANSMISSION	SERVICE: SU	JBSCR	BERS AND R	ATES				
E	In General: The information in s			-		•			
Secondary	system, that is, the retransmission about other services (including p								
Transmission	last day of the accounting period							ing on the	
Service: Sub-	Number of Subscribers: Both						ble system	, broken	
scribers and	down by categories of secondary			0 / 1					
Rates	each category by counting the ne separately for the particular serv			•••		•		charged	
	Rate: Give the standard rate c					•	,	ge and the	
	unit in which it is generally billed	· ·		,	ny standa	rd rate variatior	s within a	particular rate	
	category, but do not include disc				ing of any			a that askis	
	Block 1: In the left-hand block systems most commonly provide	•		-		•			
	that applies to your system. Not								
	categories, that person or entity								
	subscriber who pays extra for ca					d in the count u	nder "Servi	ce to the	
	first set" and would be counted of Block 2: If your cable system I					service that are	e different f	rom those	
	printed in block 1 (for example, t	-		•					
	with the number of subscribers a	ind rates, in th	e right-	hand block. A tv	vo- or thre	e-word descript	tion of the s	service is	
	sufficient.								
	BLU	DCK 1 NO. OF	:				BLOCK	NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CATE	EGORY OF SEI	RVICE	SUBSCRIBERS	RAT
	Residential:								
	 Service to first set 		304	28.49					
	 Service to additional set(s) 								
	 FM radio (if separate rate) 								
	Motel, hotel		0	28.49					
	Commercial		15	28.49					
	Converter								
	Residential Non-residential								
	• Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s				
F	In General: Space F calls for rat		,		•				
Г	not covered in space E, that is, t					,	,		
Services	service for a single fee. There ar furnished at cost or (2) services	•			0				
Other Than	amount of the charge and the un								
Secondary	enter only the letters "PP" in the								
ransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that			•		• •		were not	
Rates	listed in block 1 and for which a	• •			-	-	-		
	brief (two- or three-word) descrip	otion and inclue	de the r	ate for each.					
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEGO	ORY OF SERVICE	RATE
	Continuing Services:		Install	ation: Non-res	idential				
	• Pay cable	16.99	• Mc	otel, hotel				led Basic	46.0
	 Pay cable—add'l channel 		• Co	mmercial				Tier (Premier P	22.9
	Fire protection			y cable			Variety		14.9
	•Burglar protection			y cable-add'l ch	annel		HD Tier		6.9
	Installation: Residential			e protection			Latin T		7.9
	• First set	54.99		rglar protection				Plus Pak	14.9
	Additional set(s)	30.00		services:				ports Tier	4.9
	• FM radio (if separate rate)			connect		30.00	Movie 1	ler	7.9
	• Converter			sconnect tlet relocation		20.00			
			• ()))	upt relocation		30.00			
				ive to new addr		30.00			

	2022/1			FORM SA1-2E. PAG
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM I
	Grande Communicat	•		54
_	PRIMARY TRANSMITTERS:			
G	carried by your cable syste FCC rules and regulations	entify every television station (including m during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th	t (1) stations carried only on a part- ne carriage of certain network progr	time basis under ams [sections
Primary		e)(2) and (4), or 76.63 (referring to 76.6	i1(e)(2) and (4))]; and (2) certain sta	ations carried on a
ansmitters: elevision		s explained in the next paragraph. With respect to any distant stations ca	arried by your cable system on a su	bstitute program
	basis under specific FCC ru	ules, regulations, or authorizations:		
	• Do not list the station her station was carried only on	e in space G—but do list it in space I (tl a substitute basis.	he Special Statement and Program	Log)—if the
	• List the station here, and	also in space I, if the station was carried		
		on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p		
	multicast stream associated	d with a station according to its over-the	•	-
	"WETA-2" as the same on Column 2: Give the chann	the form. el number the FCC assigned to the tele	evision station for broadcasting over	the air in its community
	of license. For example, W	/RC is channel 4 in Washington, D.C.	-	-
		n case whether the station is a network ering the letter "N" (for network), "N-M" (-	
	(for independent multicast)	, "E" (for noncommercial educational), c	or "E-M" (for noncommercial educat	
		erms, see page (iv) of the general instru n of each station. For U.S. stations, list		is licensed by the
		dian stations, if any, give the name of the	-	
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KCEN	9	N	Temple, TX
	KWTX	10	N	Waco, TX
Necessary	KXXV	25	Ν	Waco, TX
	кwкт	44	Ν	Waco, TX
	KNCT	46	E	Killeen, TX
	KCEN-2	9.1	I	Temple, TX
	KWTX-2	10.1	N	Waco, TX
	KXXV-2	25.1	N	Waco, TX
	KWKT-2	44.1	Ν	Waco, TX

Grande Com	municatio	ns Net	works, LLC					SYSTEM I 54
	every radio s	tation ca	arried on a separate and discr nerally receivable by your cab					н
eceivable if (1) on the basis of r For detailed info paper SA1-2 for Column 1: Id Column 2: Si Column 3: If ignal, indicate t Column 4: G	it is carried by monitoring, to mation abou m. entify the call tate whether t the radio stati this by placing ive the station	y the sys be recei t the Co sign of e he statio ion's sign g a check n's locatio	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process (mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante this point, see pa ed by the cable s ne station is licens	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can l ertain st eneral ir eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
						I		

Accounting Perio	od: 2022/1						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	Grande Communication	ons Netwo	orks, LLC					5430
	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	NT AND PROGRAM LC	G			
Substitute	In General: In space I, ident substitute basis during the a explanation of the programn	accounting p	eriod, under sp	pecific present and former F	CC rules, reg	ulations, o	r authorizatio	ons. For a further
Carriage:	1. SPECIAL STATEMEN							
Special	During the accounting pe				isis anv noni	network te	evision proc	ıram
Statement and	broadcast by a distant sta			in carry, on a capolitato be	lolo, any nom		· •	
Program Log	broaucast by a distant sta						YES	NO
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you ı	nust comp	lete the pro	gram
	log in block 2.							
	period, was broadcast by a under certain FCC rules, re Do not use general catego "NBA Basketball: 76ers vs. Column 2: If the prograt Column 3 : Give the call	titute progra ace, please of every no distant sta egulations, o ries like "mo Bulls." m was broa sign of the	am on a separ add additiona onnetwork tele tion and that y or authorizatio ovies" or "bask dcast live, ent station broado	I rows to the tables. vision program ("substitute our cable system substitut ns. See page (v) of the ge tetball." List specific progra er "Yes." Otherwise enter casting the substitute prog	e program") t ted for the pro neral instruct am titles, for e "No." ram.	hat, during ogramming ions for fu example, "	the accoun g of another rther informa I Love Lucy"	ting station ation. or
	the case of Mexican or Car Column 5: Give the mon first. Example: for May 7 gi	nadian station nth and day ve "5/7." es when the	ons, if any, the when your sy e substitute pr	stem carried the substitute ogram was carried by you	e station is id e program. U r cable syste	entified). se numera m. List the	lls, with the r	month rately
		and regulat	ions in effect o		od; enter the	etter "P" if	the listed pr	
		•						
		UBSTITUT	E PROGRAM	1	CARRI	N SUBST	URRED	7. REASON FOR DELETION
				4. STATION'S LOCATION		AGE OCO		7. REASON FOR DELETION
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		
	s	UBSTITUT 2. LIVE?	3. STATION'S		CARRI 5. MONTH	AGE OCO 6.		

Accounting Period:	2022/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Grande Communications Networks, LLC	S`	YSTEM ID# 5430
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmit (as identified in space E) during the accounting period. For a further explanation of how to compute this a page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	ission service amount, see	3,118.58 ss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, <i>or</i> block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$2 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for t	this six-mon	
	accounting period is \$52.00		
	Line 1. Royalty fee for accounting period	\$	52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	_
	1. Base amount under statutory formula \$ 263,800.00		
	2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8		0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informati		nts!

Accounting Period:	2022/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Grande Communications Networks, LLC	SYSTEM ID# 5430
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations 2. Enter the total number of activated channels on which the cable system carried television broadcast stations on which the cable system carried television broadcast stations and nonbroadcast services	13 385
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name Greg Russo Telephone 73	2-580-6085
	Address 650 College Road East, Suite 3100 (Number, street, rural route, apartment, or suite number) Princeton, NJ 08540 (City, town, state, zip)	
	Email gregory.russo@astound.com Fax (optional)	
O	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) • I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; ou (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable syste in line 1 of space B and that the owner is not a corporation or partnership) or the legal entity identified as owner in line 1 of space B. (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner in line 1 of space B. (I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. (I B U.S.C., Section 1001(1986)) (Section 1001(1986)) (Section 1001(1986)) (Typed or printed name: Parisa Salehani Title: Senior Vice President - Controller (Title of official position held in corporation or partnership) Date: B/31/22	em as identified
	Date: 8/31/22	

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	2022/1	FORM SA1-2E. PAGE
AL NAME OF OW	NER OF CABLE SYSTEM:	SYSTEM ID
nde Commu	nications Networks, LLC	543
SPECIAL ST The Satellite He lowing sentence "In deter service of scribers For more inform located in the p During the accor made by satelli X NO	TATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS ome Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol-	P Special Statement Concerning Gross Receipts Exclusion
-		
	tion of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	~
Line 1 Enter th	he amount of late payment or underpayment	Interest Assessmen
Line 1 Enter th	he amount of late payment or underpayment	Interest Assessmen
Line 1 Enter th Line 2 Multiply Line 3 Multiply Line 4 Multiply	he amount of late payment or underpayment	Interest Assessmen
Line 1 Enter th Line 2 Multiply Line 3 Multiply Line 4 Multiply in space * To view th contact th	he amount of late payment or underpayment	Interest Assessmer
Line 1 Enter th Line 2 Multiply Line 3 Multiply Line 4 Multiply in space * To view th contact th	he amount of late payment or underpayment	Interest Assessmer
Line 1 Enter th Line 2 Multiply Line 3 Multiply in space * To view th contact th ** This is th NOTE: If you a	he amount of late payment or underpayment	Interest Assessmer
Line 1 Enter th Line 2 Multiply Line 3 Multiply in space * To view th contact th ** This is th NOTE: If you a	he amount of late payment or underpayment	Interest Assessmer
Line 1 Enter th Line 2 Multiply Line 3 Multiply in space * To view th contact th ** This is th NOTE: If you a list below the or Owner Address	he amount of late payment or underpayment	Interest Assessmen
Line 1 Enter the Line 2 Multiply Line 3 Multiply Line 4 Multiply in space * To view the contact the ** This is the NOTE: If you a list below the or Owner	he amount of late payment or underpayment	Interest Assessmer

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